



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES  
STATE PUBLIC HEALTH LABORATORY  
ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

**RECEIVED**

By Carol Day at 10:53 am, Sep 09, 2015

Complete this report in duplicate at the time of the regular monthly preventative maintenance. Send copy to Department of Health and Senior Services; retain original in department.

ALCO SENSOR IV SN 26999	PRINTER SN 13.1891.096	DATE OF INSPECTION 09-08-2015
LOCATION OF INSTRUMENT (STREET AND CITY) 501 Faraon St. St. Joseph		TIME OF INSPECTION 1432

**CHECKLIST:** Place a mark in the box by each item it found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

☒ DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)

☒ TEMPERATURE OF ALCO SENSOR (1 O-C - 40-C)

☒ PRINTER WORKING PROPERLY

☒ TIME AND DATE DISPLAYING PROPERLY

**BREATH ALCOHOL ACCURACY STANDARDS**

☐ SIMULATOR SOLUTION

☒ COMPRESSED ETHANOL-GAS MIXTURE

☒ STANDARD SUPPLIER Intoximeters LOT # AG428002 EXP. DATE 10-07-2016

☐ SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIMULATOR SN SIMULATOR EXP DATE

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE

☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% and 0.084% INCLUSIVE

☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE

TEST 1 - .100	TEST 2 - .099	TEST 3 - .098
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☒ RFI DETECTOR OPERATING

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:  
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	0	(0-.04)	1	(.05-.09)	7	(.10-.14)	5	(.15-.19)	1	(OVER .19)	0
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List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).

**INSPECTING OFFICER**

SIGNATURE <i>Sgt. Chris McBane</i>	PRINT NAME Sgt. Chris McBane
TYPE II PERMIT NUMBER/EXPIRATION DATE 250130 06-08-2017	TELEPHONE NUMBER (816) 271-5359

Return completed report to the: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office  
2875 James Boulevard  
Poplar Bluff, MO 63901



Airgas USA LLC (LAB)  
3500 Bernard Street  
St. Louis, Mo. 63103  
Ph: (314) 533-3100  
Fax: (314) 533-7328

## Certificate of Analysis

Customer Name  
Intoximeters, Inc.  
2081 Craig Road  
St. Louis, Mo 63146

Test Date: 8-Oct-2014

Lot # AG428002

Exp. Date  
7-Oct-2016

Cyl. Type  
108

Component  
Ethanol  
Nitrogen

Certified Concentration  
0.100  $\pm$  2% BrAC (272 ppm)  
Balance

Certification Traceable to N.I.S.T. RGM Ethanol Standards:

<u>Serial No.</u>	<u>Concentration</u>
EB0010581	391.8 ppm
EB0010570	259.8 ppm
EB0010285	209.0 ppm
EB0010561	103.7 ppm
EB0010681	52.22 ppm

<u>Serial No.</u>	<u>Concentration</u>
EB0010603	392.5 ppm
EB0010559	258.9 ppm
EB0010595	208.9 ppm
EB0010562	104.9 ppm
EB0010579	52.94 ppm

Analytical Method: NDIR

Digitally signed by Quality Control  
Date: 2014.10.08 12:15:00 -05:00  
Reason: Dry gas standard certification of analysis  
Location: Airgas USA LLC (Lab)

Analyst: \_\_\_\_\_

*Rod Marsala*  
Rod Marsala

ISO 17025:2005 A2LA accredited. Certificate Number 2989.01

Serial no: 020999  
NO: 7409

TEST RECORD 01692

Date Time 210L  
s/

09/08/15 14:02 .000  
Operation Check  
09/08/15 14:02

Subject Name

Subject I.D.

McBarr #3240  
Operator Name, I.D.

501 Barron  
Location

Serial no: 020999  
NO: 7409

TEST RECORD 01693

Date Time 210L  
s/

09/08/15 14:04 .000  
Operation Check  
09/08/15 14:04 .059

Subject Name

Subject I.D.

McBarr #3240  
Operator Name, I.D.

501 Barron  
Location

Serial no: 020999  
NO: 7409

TEST RECORD 01694

Date Time 210L  
s/

09/08/15 14:07 .000  
Operation Check  
09/08/15 14:07 .058

Subject Name

Subject I.D.

McBarr #3240  
Operator Name, I.D.

501 Barron  
Location

Serial no: 020999  
NO: 7409

TEST RECORD 01695

Date Time 210L  
s/

09/08/15 14:09  
Operation Check  
09/08/15 14:09

Subject Name

Subject I.D.

McBarr #3240  
Operator Name, I.D.

501 Barron  
Location